

STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

For Official Use

IN THE INTEREST OF

**Petition to Expunge Court  
Record of Adjudication/  
Recommendation of  
District Attorney**

\_\_\_\_\_  
Name

Case No. \_\_\_\_\_

\_\_\_\_\_  
Date of Birth

Under oath to tell the truth I state:

1. I am the person adjudicated delinquent in this case. I am asking that the court's record of my adjudication be expunged. I understand that if the record is expunged:
  - only the court record of the adjudication will be expunged;
  - other court records, records of the police, the Crime Information Bureau, and other law enforcement agencies, district attorney, or social services will not be affected;
  - expungement does not mean that the delinquency adjudication is vacated or set aside, only that no record of the adjudication will exist in this court's records.
2. I am now 17 years of age or older.
3. I have satisfactorily completed all provisions of the court's dispositional order in this case, including any revisions or modifications of same.
4. Society will not be harmed by granting my request to expunge the record of the adjudication
5. It will benefit me to have the record of the adjudication expunged.

Subscribed and sworn to before me

on \_\_\_\_\_

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Notary Public, State of Wisconsin

\_\_\_\_\_  
Name Printed or Typed

My commission expires: \_\_\_\_\_

*Instruction to petitioner: Before filing with the court, please have the district attorney involved in your case complete the recommendation below. Depending on the district attorney's recommendation, the court may or may not schedule a hearing in this matter before making a decision.*

**Recommendation of District Attorney**

- ☐ 1. I support the petition.
- ☐ 2. I object to the petition and request that this matter be set for a hearing on the petition.

\_\_\_\_\_  
Signature of District Attorney

Distribution:

1. Original - Court
2. Petitioner
3. District Attorney

\_\_\_\_\_  
Date